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CONFIRMATION NO. 9675

<b>SERIAL NUMBER</b> 10/626,213	<b>FILING OR 371(c) DATE</b> 07/24/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1644	<b>ATTORNEY DOCKET NO.</b> 26983-133
<b>APPLICANTS</b> Emilio Barbera-Guillem, Powell, OH; M. Bud Nelson, Worthington, OH; <i>wer ms</i>				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/643,595 08/22/2000 ABN which claims benefit of 60/152,498 09/02/1999 and claims benefit of 60/150,256 08/23/1999 <del>(*) Data provided by applicant is not consistent with PTO records.</del> <i>ms ms</i>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 03/30/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>ms</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 32
				<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> 21130				
<b>TITLE</b> Methods and compositions for immunotherapy of B cell involvement in promotion of a disease condition comprising multiple sclerosis				
<b>FILING FEE RECEIVED</b> 567	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	